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NEW MEXICO OIL CONSERVATION COMMISSION

APR 17 12 52 PM '69

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
"M"	
8. Farm or Lease Name	
J. G. O'Brien "198"	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
Wildcat	
12. County	
Chaves	

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - A" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☐ GAS WELL ☐ OTHER- **Dry**

2. Name of Operator
Ball Petroleum Company

3. Address of Operator
P. O. Box 1538 - Midland, Texas 79701

4. Location of Well
UNIT LETTER **"M"**, **660** FEET FROM THE **South** LINE AND **660** FEET FROM THE **West** LINE, SECTION **31** TOWNSHIP **8-S** RANGE **30-E** NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
4095' GR 4103' DF

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Pulled tubing and bridge plug.
2. Cemented perforations 3240-3315'.
3. Cut 4-1/2" casing at 2432' and pulled.
4. PLUGS: 25 sx at 4-1/2" stub @ 2432'.
25 sx at top of Salt @ 964'.
25 sx at 8-5/8" csg shoe @ 295'.
10 sx at surface.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED *John W. Kuyper* TITLE Production Supervisor DATE April 16, 1969

APPROVED BY *John W. Kuyper* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: